

DEPARTMENT OF EMPLOYEE RELATIONS TRAINING & EXPERIENCE QUESTIONNAIRE FOR Civil Engineer III Environmental Engineering

NAME:	
MAILING ADDI	
DAYTIME PHO	NE NUMBER: ()
	SS
	TO MAKE COPIES OF ALL APPLICATION MATERIALS YOU SUBMIT
of the selection parties selecting the moinformation; and	esume is <u>not</u> a substitute for this questionnaire. This questionnaire is an important par process. The information provided is subject to verification and will be used to assist is qualified candidates. Credit will <u>not</u> be given for incomplete or incorrect falsification of this form may result in disqualification or removal from a City type or use <u>BLACK INK</u> (required for reproduction purposes).
SUBMIT TO:	Martin Aquino Environmental Engineering Municipal Building, Room 820 841 N. Broadway Milwaukee, WI 53202
the best of my kn	LLY BEFORE SIGNING: The answers to this questionnaire are true and complete to owledge. I understand that falsification of this questionnaire may result in removal from a City position.
	YOU MUST SIGN AND DATE THIS FORM
SIGNATURE	DATE

ED	DUCATION AND TRAINING		(Office Use OnlyID# _	· · · · · · · · · · · · · · · · · · ·
A.	. Bachelor's Degree: YES NO		Nonth and Year Earned:	
	Major:	M:	nor:	
	Name and address of College			
В.	Master's Degree: YES NO		Month and Year Earned:	
	Major:	M	inor:	
	Thesis or Special Emphasis:			
	Name and address of College	or University attended:		
	PROGRAM OR SEMINAI TITLE	R PROGRAM SPONSORED BY	DATE(S) ATTENDED	CREDIT
_				
-				
-				
PR	OFESSIONAL REGISTRAT	TION		
PR	Are you registered as a Profess	sional Engineer in the State of Wi	sconsin? YES NO _	
		sional Engineer in the State of Wi	sconsin? YES NO _	
W (Are you registered as a Profess Date Registered: ORK EXPERIENCE	sional Engineer in the State of Wi		
W(Are you registered as a Profess Date Registered: ORK EXPERIENCE It your previous work expering the same format) esent Employer	sional Engineer in the State of Wi		
W(Are you registered as a Profess Date Registered: ORK EXPERIENCE It your previous work experieng the same format) esent Employer 1. Title	ence starting with your present	i job. (If necessary, attach ad	ditional sh

4.	Employer			
5.	Address			
6.	City		State	Zip Code
7.	Supervisor's Name and Title			
8.	List and briefly describe the percentage of time performing	,	· ·	job and the approximate
Pre	evious Employer			
1.	Title			
	From(Month/year)			
3.	Annual Salary:			
4.	Employer			
5.	Address			
6.	City			
7.	Supervisor's Name and Title			
8.	List and briefly describe the percentage of time performing	,	, <u>,</u>	job and the approximate
Pr	evious Employer			
1.	Title			
2.	From (Month/year)	To	(Month/year)	Hours per week
3.	Annual Salary:			
4.	Employer			
5.	Address			
6.	City		State	Zip Code
7.	Supervisor's Name and Title			

	8.	percentage of time performing each duty.
, DEI		TD EVERNENCE
Plea	ise de	ED EXPERIENCE escribe your experience in each of the following areas including the amount of experience and e of the employer. (Attach additional pages if more space is necessary.)
A.	Sev	werage system design, analysis and construction including hydraulic studies.
В.	Sto	orm water pollution abatement programs.
C.	Res	solutions, street and alley vacations, easements, and licenses.
D.	Sar	nitary and storm water monitoring and sampling programs.

-	Preparation of permits, reports and grant applications.
	Review of storm water management plans, permits, and reports.
١	ciaison with property owners and other City/government agencies such as the Milwaukee Metropolitan Sewerage District, Department of City Development and Department of Neighborhood Services.
	Administration of the Capital Improvement Program including sewer program preparation, funding and cash flow.

K.	Review of and preparation of responses to plans and specifications prepared by MMSE connection with its Capital Program
L.	Supervision of other employees.
Des	DITIONAL INFORMATION cribe any other qualifications or experience that may have prepared you or may further qualify you have prepared you have prepared you have prepared you have prepared you have you have prepared you have prepared you have you have prepared you have you
Des	cribe any other qualifications or experience that may have prepared you or may further qualify y
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VI. COMPUTER KNOWLEDGE: Please specify computer software products with which you are familiar, give a self-assessment of your skill level, briefly describe your experience (what you used the product for), and estimate approximate amount of experience.

WORD PROCESSING, specify each	product name (e.g., MS W	ord 2000):		
Product:	□ basic □ intermediate	□ advanced	Coursework Yes	No
Product:	□ basic □ intermediate	□ advanced	Job Experience Yes	No
Product:	□ basic □ intermediate	□ advanced	Years of Experience	
			rears of Experience	
BRIEF DESCRIPTION OF EXPERIEN	ICE:			
		->		
SPREADSHEET, specify each produ			Coursework Yes	No
Product:	L basic L intermediate	□ advanced	Job Experience Yes	
Product:Product:			_	
Froduct:	u basic u intermediate	□ auvanceu	Years of Experience	
PRICE DECCRIPTION OF EVERIEN	ICE			
BRIEF DESCRIPTION OF EXPERIEN	NCE:			
			1	
DATA BASE, specify each product r			Coursework Yes	No
Product:	□ basic □ intermediate	e □ advanced		
Product:	□ basic □ intermediate	e □ advanced	Job Experience Yes	No
Product:	□ basic □ intermediate	e □ advanced	Years of Experience	
BRIEF DESCRIPTION OF EXPERIEN	ICE.			
DRIEF DESCRIPTION OF EXPERIEN	NCE:			
OTHER, specify product name (e.g.,	WINDOWS 2000 MS Powe	rPoint 2000		
SAS, SPSS, etc.):		2000)	Coursework Yes	No
Product:	□ basic □ intermediate	□ advanced		
Product:			Job Experience Yes	
Product:			Years of Experience	
BRIEF DESCRIPTION OF EXPERIEN	ICE:			